

SAMPLE NOTICE: MAGI Ineligibility Termination Notice

06/01/2023

999999999

JOHN DOE
441 4TH STREET, NW
WASHINGTON, DC 20001

Subject: Ineligibility for Medicaid and Private Health Coverage through DC Health Link

Dear JOHN DOE:

Thank you for submitting your application or renewal form. Unfortunately, based on the information you provided on your application or renewal form, we have determined that the following individuals are not eligible for Medicaid or to buy private health insurance from DC Health Link.

JOHN DOE

Medicaid Decision

Based on the information that you provided on your application or renewal form and information from other data sources, the following individual(s) are not eligible for Medicaid because they have not verified that they are a U.S. citizen, U.S. National, or have an eligible immigration status for Medicaid.

Individual(s)	Status
Individual does not meet citizenship/qualifying immigration status. JOHN DOE	Does not meet Medicaid citizenship requirements or does not have an eligible immigration status for Medicaid.

This decision is supported by 42 CFR 435.406, 8 USCS §§ 1611, 1612, and 1613.

If you disagree with this determination, you have a right to request a hearing. Please see the section below called, "If You Think We Made a Mistake," and the insert referenced in that section for an explanation of your rights and how to request a hearing.



However, these person(s) may be eligible for a local medical assistance program called the DC Health Care Alliance (“Alliance”) program. To get more information please contact DC Health Link Customer Service Center at 1-855-532-5465.

Federal law requires that you be a “qualified non-citizen” for at least five years before you can get Medicaid. Based on the information that you provided on your application or renewal form and information from other data sources, you became a “qualified non-citizen” less than 5 years ago. The following persons are ineligible for Medicaid until the listed date (5-year bar date) due to their immigration status:

Individual(s)	5-Year Bar Date
JOHN DOE	May 31, 2024

This decision is supported by 42 CFR 435.406 and the following provision of the United States Code: U.S.C. § 1613.

However, these person(s) may be eligible for a local medical assistance program called the DC Health Care Alliance (“Alliance”) program. To get more information please contact DC Health Link Customer Service Center at 1-855-532-5465.

If you disagree with this determination, you have a right to request a hearing. Please see the section below called, “If You Think We Made a Mistake,” for an explanation of your rights and how to request a hearing.

Your Secure User Account

Important information is stored in your account on our DC websites. If you don’t have an account already and are seeking Medicaid, DC Healthcare Alliance, or Immigrant Children Program coverage, you can create one by going to districtdirect.dc.gov. Medicaid, DC Healthcare Alliance, or Immigrant Children Program customers can get help with logging in or creating an account by calling the DHS Call Center at (202) 727- 5355 / TTY 711.

If you don’t have an account already and are seeking Individual & Family health insurance coverage, you can create one by going to www.DCHealthLink.com. Individual & Family health insurance customers can get help with logging in or creating an account by calling DC Health Link Customer Service toll-free at [\(855\) 532-5465](tel:8555325465) / TTY 711

If You Think We Made a Mistake

If you disagree with any determination about the amount or type of health care coverage benefits you or any of the other persons in your household was found eligible for, you have the right to appeal the determination(s). You may request an appeal by phone, in person, online, and by mail.

You must request an appeal **by 09/28/2023**. D.C. Official Code §4-210.09, 42 C.F.R. §431.221, and 45 C.F.R. §155.520. **See the insert for more information on your appeal rights.**

DC Health Link Appeal Rights

If you do not agree with our decision about your health insurance coverage or assistance, you have a right to appeal our decision and receive a Fair Hearing. You can appeal a denial, termination, or change in your eligibility for Medicaid, premium tax credits, cost-sharing assistance, or for an enrollment period. You can also appeal if you disagree with the amount of your premium tax credits or cost-sharing assistance. Once you appeal, you can go before an Administrative Law Judge and explain why you do not agree with our decision.

You have **90 days** following the postmark of the notice informing you of the eligibility decision, denial, termination, or change, to appeal the decision stated in the notice you received. If you do not appeal within **90 days, you may lose your appeal right.**

How to Request an Appeal

You may appeal through any of the following methods:

- Calling DC Health Link Customer Service toll free at 1-855-532-5465
- Completing a Request for Hearing form and fax it to (202) 724-2041, or e-mail to DC.OARA@DC.GOV
- Going to any Department of Human Services Service Center (locations found at www.dhs.dc.gov) and filling out a Request for Hearing.
- Going to the Office of Administrative Hearings Resource Center, located at 441 4th Street NW, Suite 450-North, Washington, DC 20001 and filling out a Request for Hearing form.

Your Eligibility During Your Appeal

Medicaid – If you get Medicaid and file the appeal before your Medicaid ends or within 15 days of the date of this notice – whichever is later - you will continue to be covered by Medicaid. Even if you file the appeal after your Medicaid coverage has ended, but still within 90 days of the postmark of this eligibility notice, your appeal can still be heard but your coverage may not be re-started.

Premium Tax Credits & Cost-Sharing Assistance – If you already get help paying for your health insurance through DC Health Link, you have a choice to remain enrolled in your selected plan. You will continue to get the same level of assistance you were eligible for before the denial, termination, or change made in the notice. However, if you lose the appeal, you may be responsible for any benefits that you received during the appeal process.

What Happens When You Appeal

Administrative Review – Once your appeal is received, you will be scheduled for an Administrative Review Conference at the Office of Administrative Review and Appeals (OARA). This is a voluntary meeting with a Hearing Examiner from the District of Columbia Department of Human Services (DHS) to identify and discuss your concerns. You can bring your own representative if you choose to have one. Your representative may, but does not have to be, an attorney. Your representative may not be an employee of DHS.

Please bring documents related to your case to the meeting. This will help the DHS Hearing Examiner identify and understand your concerns. After the meeting Conference, the DHS Hearing Examiner will review your case and try to resolve your issues. You will receive a written decision from the DHS Hearing Examiner regarding the issues of your case, including a summary of facts. If you agree with the written decision, you may withdraw your request for a Fair Hearing. If you do not agree with the DHS Hearing Examiner's written decision, your appeal still continues to a Fair Hearing.

Fair Hearing - If you decide not to attend the DHS Administrative Review, or if you disagree with DHS's decision regarding your case and you have not withdrawn your request for a Fair Hearing, your case will continue on to a Fair

Hearing before an Administrative Law Judge who is not an employee of DHS. The Fair Hearing will take place at the DC Office of Administrative Hearings (OAH) at 441 4th Street NW, Suite 450-North, Washington, DC 20001. OAH will contact you and tell you when and where your Fair Hearing will take place. OAH will send you a scheduling notice. That notice will tell you when your Fair Hearing will take place.

At the Fair Hearing, you can testify, have others testify for you, and submit documents. At the hearing, DC agency representatives will also be able to ask questions of you or other people who testify. The DC agency representatives will be permitted to present testimony and documents. You will be able to ask questions of the DC agency representative if you want. Finally, the Administrative Law Judge will make a decision in writing, after the completion of the Fair Hearing, and will send it to you. That decision will also tell you what you can do if you do not agree with it.

Any decisions by OARA and Appeals or OAH about your eligibility for benefits might also change the eligibility of other people in your household.

Getting Representation

You have the right to represent yourself or have a lawyer, family member, or friend represent you at the Administrative Review and or at the Fair Hearing.

If you would like to talk to a lawyer who will represent you for free, you can call any of the following places to see if they can help you. There is no guarantee that you will be able to get legal help. Even if you do not get legal help, there will still be a Fair Hearing held and a decision made.

Bread for the City Legal Clinic
1525 Seventh Street, NW
(202) 265-2400

Bread for the City Legal Clinic
1640 Good Hope Road, SE
(202) 561-8587

Neighborhood Legal Services
1213 Good Hope Road
(202) 678-2000

Legal Aid Society of the District of Columbia
1331 H St. NW Suite 350
(202) 628-1161

Legal Aid Society of the District of Columbia
2041 Martin Luther King Jr. Ave. SE, Suite LL-1
(202) 628-1161

Legal Aid Society of the District of Columbia
Friendship Baptist Church,
900 Delaware Ave., SW
(202) 628-1161

Legal Counsel for the Elderly
(for people age 60 and older)
Building A, 4th Floor
601 E St. NW
(202) 434-2120

Washington Legal Clinic for the Homeless
1200 U Street, NW
(202) 328-5500

Ending Your Appeal Early

You may withdraw your request for a Fair Hearing at any time before the Administrative Law Judge makes a final written decision. You may withdraw through any of the methods available for requesting an appeal (described above). If you withdraw your request for a Fair Hearing because of the meeting with the Office of Administrative Review and Appeals, or because the agency has promised to change its decision, we will make a new decision will be based on the changes agreed to by the agency.

If you stop your appeal before the agency has changed its decision, the denial, termination, or change will be implemented as it is written in the notice you first received before you filed your appeal.